



Jurisdiction: KIRKLAND
Project Name: Choi Application for Variance
Application ID: 319251

Supplemental Name: Variance Criteria

An answer to each of the following questions must be submitted with any application:

1. How would the Variance not be materially detrimental to the property or improvements in the area of the subject property or to the City in part or as a whole?

Please refer to the .pdf document for response to this question. The pdf document was reviewed by both Ms. Allison Zike and her supervisor and was deemed to contain sufficient information for successful variance application.

2. How is the Variance necessary because of special circumstances regarding the size, shape, topography, or location of the subject property; or the location of a pre-existing improvement on the subject property that conformed to the Zoning Code in effect when the improvement was constructed?

Please refer to the .pdf document for response to this question. The pdf document was reviewed by both Ms. Allison Zike and her supervisor and was deemed to contain sufficient information for successful variance application.

3. How would the Variance not constitute a grant of special privilege to the subject property which is inconsistent with the general rights that this Code allows to other property in the same area and zone as the subject property?

Please refer to the .pdf document for response to this question. The pdf document was reviewed by both Ms. Allison Zike and her supervisor and was deemed to contain sufficient information for successful variance application.

Supplemental Name: Additional Contact Information

Enter Applicant's Email Address:

samchoi1@gmail.com

AN ELECTRONIC COPY OF OR A WEB LINK TO THE STAFF REPORT, MEETING AGENDAS AND THE NOTICE OF FINAL DECISION WILL BE EMAILED TO THE APPLICANT AT THE ABOVE LISTED EMAIL ADDRESS. IF YOU PREFER TO RECEIVE A PAPER COPY, THEY ARE AVAILABLE UPON REQUEST. PLEASE INDICATE IF YOU WOULD ALSO LIKE A COPY OF THESE MATERIALS TO BE SENT TO THE PROPERTY OWNER'S EMAIL ADDRESS:

Yes

If Yes, please enter Owner's Email Address below. If No, please enter N/A:

samchoi1@gmail.com

Supplemental Name: Right to Enter Property/Hold Harmless Agreement

AUTHORITY TO ENTER PROPERTY/HOLD HARMLESS AGREEMENT -- READ CAREFULLY BEFORE CLICKING AGREE AND ENTERING NAME BELOW

I/we acknowledge that by clicking Agree below and submitting this application I/we are authorizing employees or agents of the City of Kirkland to enter onto the property which is the subject of this application during the hours of 7:00 a.m. to 5:00 p.m., Monday through Friday, for the sole purpose of making any inspection of the limited area of the property which is necessary to process this application. In the event the City determines that such an inspection is necessary during a different time or day, the applicant(s) further agrees that City employees or agents may enter the property during such other times and days as necessary for such inspection upon 24 hours notice to applicant(s), which notice will be deemed received when given either verbally or in writing.

I/we acknowledge that by clicking agree below and submitting this application I/we certify under penalty of perjury, the truth and/or accuracy of all statements, designs, plans and/or specifications submitted with said application and hereby agrees to defend, pay, and save harmless the City of Kirkland, its officers, employees, and agents from any and all claims, including costs, expenses and attorney's fees incurred in investigation and defense of said claims whether real or imaginary which may be hereafter made by any person including the undersigned, his successors, assigns, employees, and agents, and arising out of reliance by the City of Kirkland, its officers, employees and agents upon any maps, designs, drawings, plans or specifications, or any factual statements, including the reasonable inferences to be drawn therefrom contained in said application or submitted along with said application.

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the above answers are true and complete to the best of my knowledge. I understand that the lead agency is relying on them to make its decision.

Agree

Enter Full Name of Person(s) Agreeing with Statements Above:

SEUNG IL CHOI



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